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Fees pursuant to the Consoldiated Appropriations Act. 2006 (H.R. 4618). FEE TRANSMITTAL For FY 2006				Complete if Known					
				Application Number 09/864,373					
				Filing Date	N	May 25, 2001			
				First Named Inv	entor V	William F. KRISE et al.			
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name	e L	Leon Yun Bon Lum				
Applicant claims small	entity status	s. See 37 CFR 1.2	27	Art Unit	1	641			
TOTAL AMOUNT OF PAY	MENT (\$	0.00		Attorney Docke	t No. K	RISE 1A			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 502895 Deposit Account Name: U.S. Geological Survey									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Grange rector, indicated solon, except to the iming the									
Charge any additional tee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization			t card inf	ormation should n	ot be inclu	ded on this form. Pro	ovide credit card		
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEAR			FEES						
	FILING	FEES Small Entity	SEAR	CH FEES Small Entity	EXAMI	NATION FEES			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (S	Small Entity Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (S) Each claim over 20 (including Reissues) 50 25									
Each independent claim over 3 (including Reissues) Multiple dependent claims						200 360	100 180		
Total Claims	Extra Clair	ms Fee (\$)	Fee	Paid (\$)			pendent Claims		
10 - 20 or HP =		_ x		0		Fee (\$)	Fee Paid (\$)		
HP = highest number of total Indep. Claims	claims paid for Extra Clair		Eoo	Paid (\$)					
2 - 3 or HP =	- 0	x		0					
HP = highest number of indep		s paid for, if greater t	nan 3.						
If the specification and	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CF	R 1.52(e)), the application	size fee	e due is \$250 (\$	\$125 for :				
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). 1otal Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$\$) Fee Paid (\$\$) 33 - 100 = $/$ 50 = (round up to a whole number) $x = 0$									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)									
Other (e.g., late filing surcharge):									
SUBMITTED BY									

SUBMITTED BY							
Signature	/Christine J. Gilsdorf/	Registration No. (Attorney/Agent) 43,635	Telephone 256-955-3213				
Name (Print/Type)	Christine J. Gilsdorf		Date May 24, 2006				

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